

CEDAR SPRINGS HEALTH/REHABILITATION CENTER

N27 W5707 LINCOLN BOULEVARD

CEDARBURG 53012 Phone: (262) 376-7676

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 60

Total Licensed Bed Capacity (12/31/02): 60

Number of Residents on 12/31/02: 57

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

Yes

Yes

No

58

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		
Home Health Care	No						1 - 4 Years		70.2
Supp. Home Care-Personal Care	No						More Than 4 Years		29.8
Supp. Home Care-Household Services	No		Developmental Disabilities	0.0	Under 65	3.5			0.0
Day Services	No		Mental Illness (Org./Psy)	0.0	65 - 74	8.8			-----
Respite Care	No		Mental Illness (Other)	0.0	75 - 84	43.9			100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	35.1			*****
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.8		Full-Time Equivalent	
Congregate Meals	No		Cancer	3.5		-----		Nursing Staff per 100 Residents	
Home Delivered Meals	No		Fractures	14.0		100.0		(12/31/02)	
Other Meals	No		Cardiovascular	7.0	65 & Over	96.5			-----
Transportation	No		Cerebrovascular	10.5		-----		RNs	12.6
Referral Service	No		Diabetes	5.3	Sex	%		LPNs	16.1
Other Services	Yes		Respiratory	19.3		-----		Nursing Assistants,	
Provide Day Programming for			Other Medical Conditions	40.4	Male	22.8		Aides, & Orderlies	40.3
Mentally Ill	No			-----	Female	77.2			
Provide Day Programming for				100.0		-----			
Developmentally Disabled	No					100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care		
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)
Int. Skilled Care	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Skilled Care	20	100.0	256			0	0.0	0	0	0.0	0	37	100.0	192	0	0.0	0	0	0.0	57
Intermediate	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Total	20	100.0				0	0.0		0	0.0		37	100.0		0	0.0		0	0.0	57

100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

Percent Admissions from:		% Needing Assistance of			Total	
		Activities of	%	One Or Two Staff	% Totally	Number of
Private Home/No Home Health	4.6	Daily Living (ADL)	Independent		Dependent	Residents
Private Home/With Home Health	0.0	Bathing	3.5	71.9	24.6	57
Other Nursing Homes	2.1	Dressing	3.5	71.9	24.6	57
Acute Care Hospitals	92.2	Transferring	42.1	35.1	22.8	57
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	42.1	35.1	22.8	57
Rehabilitation Hospitals	0.0	Eating	71.9	12.3	15.8	57
Other Locations	1.1	*****				
Total Number of Admissions	282	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	8.8		Receiving Respiratory Care	19.3
Private Home/No Home Health	60.0	Occ/Freq. Incontinent of Bladder	33.3		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	26.3		Receiving Suctioning	0.0
Other Nursing Homes	6.1				Receiving Ostomy Care	1.8
Acute Care Hospitals	10.0	Mobility			Receiving Tube Feeding	3.5
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.5		Receiving Mechanically Altered Diets	24.6
Rehabilitation Hospitals	0.0					
Other Locations	9.6	Skin Care			Other Resident Characteristics	
Deaths	14.3	With Pressure Sores	7.0		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	8.8		Medications	
(Including Deaths)	280				Receiving Psychoactive Drugs	70.2

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.7	81.9	1.18	86.7	1.12	84.2	1.15	85.1	1.14
Current Residents from In-County	71.9	83.1	0.87	90.3	0.80	85.3	0.84	76.6	0.94
Admissions from In-County, Still Residing	11.0	18.8	0.59	20.3	0.54	21.0	0.52	20.3	0.54
Admissions/Average Daily Census	486.2	182.0	2.67	186.6	2.61	153.9	3.16	133.4	3.65
Discharges/Average Daily Census	482.8	180.8	2.67	185.6	2.60	156.0	3.10	135.3	3.57
Discharges To Private Residence/Average Daily Census	289.7	69.3	4.18	73.5	3.94	56.3	5.14	56.6	5.12
Residents Receiving Skilled Care	100	93.0	1.08	94.8	1.05	91.6	1.09	86.3	1.16
Residents Aged 65 and Older	96.5	87.1	1.11	89.2	1.08	91.5	1.05	87.7	1.10
Title 19 (Medicaid) Funded Residents	0.0	66.2	0.00	50.4	0.00	60.8	0.00	67.5	0.00
Private Pay Funded Residents	64.9	13.9	4.68	30.4	2.13	23.4	2.77	21.0	3.09
Developmentally Disabled Residents	0.0	1.0	0.00	0.8	0.00	0.8	0.00	7.1	0.00
Mentally Ill Residents	0.0	30.2	0.00	27.0	0.00	32.8	0.00	33.3	0.00
General Medical Service Residents	40.4	23.4	1.72	27.0	1.49	23.3	1.73	20.5	1.97
Impaired ADL (Mean)	45.3	51.7	0.88	48.9	0.93	51.0	0.89	49.3	0.92
Psychological Problems	70.2	52.9	1.33	55.5	1.27	53.9	1.30	54.0	1.30
Nursing Care Required (Mean)	8.1	7.2	1.13	6.8	1.20	7.2	1.13	7.2	1.13